

STATE OF MAINE
WATER WELL DRILLING COMMISSION
161 Capitol Street
Augusta, Maine 04330-0011

PUMP INSTALLERS REGISTRATION APPLICATION

I, _____, in accordance with 32 MRSA §4700-J hereby apply for a well pump installer registration, certify that I have been actively engaged in the trade of installing well pumps and have a minimum of three (3) years experience and have worked at least 350 hours as a pump installer during those years, have enclosed the required fee, and have stated my pertinent work history on the back of this form, as required by Section D-202.0 of the Well Driller and Pump Installer Rules.

PLEASE TYPE OR PRINT IN INK

Name of Applicant _____

Address _____

Telephone _____ Social Security # _____

Signature _____

FEE SCHEDULE (Section D-204.6) - CHECK APPROPRIATE BOX

Pump Installer	[]	\$60.00
(See Section D-202.5)		
Apprentice Pump Installer	[]	\$ -0-
(See Section D-202.6)		

MAKE CHECK PAYABLE TO STATE TREASURER FOR THE APPROPRIATE FEE AND SUBMIT WITH THE COMPLETED APPLICATION TO: Maine Water Well Drilling Commission, Health Engineering, State House Station 11, Augusta, ME 04330-0011

MASTER PLUMBERS EXEMPTION: A person who is licensed under 32 MRSA, Chapter 49, §3501, §§2.A as a master plumber is not required to register with the Commission to perform the work of a pump installer or pay an application fee.

I _____, certify that I am a licensed master plumber holding a current Maine license.

Signature

Maine Master Plumbers License No.

Residence